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SECRETARY OF STATE

T. BURCH

COVER LETTER

TO:	New Filing Section Division of Corporations
SUBJI	J JIREH Homes, LLC
зову	Name of Limited Liability Company
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Tea-Tephi Phillips
	Name of Person
	Firm/Company
	825 N 19th Ave Apt 3
	Address
	Hollywood, Fl. 33020
	City/State and Zip Code
	originalrae@gmail.com
	E-mail address: (to be used for future annual report notification)
For furth	ner information concerning this matter, please call:
	Tea-Tephi Phillips 239 321-2912 at ()
	Name of Person Area Code Daytime Telephone Number
Enclos	ed is a check for the following amount:
]\$ 125.0	O Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

J JIREH Home	s, LLC st contain the words "Limited	I liskiller Company		
(IVIU)	st contain the words. Limited	сыабину Сотрапу,	"L.L.C., or "LLC,)	
ARTICLE II - Address: The mailing address and st	treet address of the principal	office of the Limited	Liability Company is:	
<u>P</u> 1	Principal Office Address:		Mailing Address:	
825 N 19th Av			825 N 19th Ave Apt 3	
Hollywood, FI	, 33020	Holl	vwood, FL 33020	
another business entity wi	th an active Florida registrati	on.)	You must designate an	(C. N.
another business entity wi	th an active Florida registrati	on.)	You must designate an	2019. SECH TAL
another business entity wi	th an active Florida registrati street address of the registere <u>Tea-Tephi Phillips</u> 825 N 19th Ave Apt	on.) d agent are: Name		2019 JUN 17 SECRETARY TALLAHAS
another business entity wi	th an active Florida registrati street address of the registere <u>Tea-Tephi Phillips</u> 825 N 19th Ave Apt	on.) d agent are: Name		2019 JUN 17 AM SECRETARY UF TALLAHASSEL
another business entity wi	th an active Florida registrati street address of the registere <u>Tea-Tephi Phillips</u> 825 N 19th Ave Apt	on.) d agent are: Name 3 ss (P.O. Box NOT ac	cceptable) 33020	2019 JUN 17 AM SECRETARY UF TALLAHASSEL
another business entity wi	th an active Florida registrati street address of the registere <u>Tea-Tephi Phillips</u> <u>825 N 19th Ave Apt</u> Florida street addre	on.) d agent are: Name 3 ss (P.O. Box NOT ac	cceptable)	2019 JUN 17 SECRETARY TALLAHAS
another business entity wi The name and the Florida: laving been named as regis, lace designated in this certi- orther agree to comply with	th an active Florida registrati street address of the registere Tea-Tephi Phillips 825 N 19th Ave Apt Florida street address Hollywood	on.) d agent are: Name 3 ss (P.O. Box NOT ac FL State vice of process for the proper	cceptable) 33020 Zip above stated limited liad agent and agree to account and complete performa	SECRETARY OF STATE ability company at the cet in this capacity. I unce of my duties, and I
another business entity wi The name and the Florida: laving been named as regis, lace designated in this certi- orther agree to comply with	th an active Florida registrati street address of the registere Tea-Tephi Phillips 825 N 19th Ave Apt Florida street addre. Hollywood City tered agent and to accept serv ficate. I hereby accept the apt the provisions of all statutes i	on.) d agent are: Name 3 ss (P.O. Box NOT ac FL State vice of process for the proper	cceptable) 33020 Zip above stated limited liad agent and agree to account and complete performa	SECRETARY OF STATE ability company at the cet in this capacity. I unce of my duties, and I

"AMBR" = Authorized Membe	Name and Address: Tea-Tephi Phillips			
"MGR" = Manager MGR				
	825 N 19th Ave Apt 3			
	Hollywood, FL 33020			
	≥: €			
	<u></u>			
				
	·			
				
(Use attachment if necessary)				
	be specific and cannot be more than five business days prior to or 90 days a			
effective date is listed, the date m				
te of filing.)				
effective date is listed, the date mu te of filing.)	s not meet the applicable statutory filing requirements, this date will not be lis			

REOUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Tea-Tephi Phillips

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)